AR Part C

FFY2017 State Performance Plan / Annual Performance Report

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Introduction to the State Performance Plan (SPP)/Annual Performance Report (APR)

Executive Summary:

In Federal Register 34 CFR Parts 300 and 303, the Office of Special Education Programs (OSEP) instructs each Part C Lead Agency to develop a State Performance Plan (SPP) to examine its effectiveness in implementing the requirements of the Individuals with Disabilities Education Act (IDEA). Annually, each state Part C program is required to report on its efforts in the Annual Performance Report (APR). Requirements outlined in the register indicates that the state must report on 11 SPPVAPR indicators, the first ten indicators include baseline data and rigorous targets. The Office of Special Education Programs sets compliance indicators targets at 100%, while states are allowed to set their own targets for each results indicator 11, the State Systemic Improvement Plan (SSIP) is a five-year plan developed to improve the quality of early intervention services provided to infants and toddlers and their families through the Part C system. The SSIP is comprised of three phases: Phase I- Analysis, Phase II- Planning, and Phase III- Implementation and Evaluation. Multiple data sources and procedures were used for reporting performance for this APR: audits of the Comprehensive Data System (CDS), desk audits using program developed protocols, monitoring reports from the Quality Assurance/Monitoring staff, information from compliant investigations, Family Surveys and information gained from program technical assistance visits.

Arkansas SPP/APR covers the Federal Fiscal Year (FFY) 2017, reporting on data from State Fiscal Year 2017 (July 1,2017 through June 30,2018). The SPP/APR Part C Indicators 1-10 must be submitted February 1, 2019 and Phase III of the SSIP (Indicator 11) on April 2, 2019. First Connections State Performance Plan and Annual Performance Plan were developed with broad stakeholder input that includes the State Interagency Coordinating Council.

The Arkansas Department of Human Services (ADHS) is the lead agency for the planning and implementation of the Part C grant. Arkansas Part C is housed in the Division of Developmental Disability Services, and is responsible for the administration of regulatory activities related to the direction of Part C. First Connection is the official program name for Arkansas Part C.

The First Connections program has five individual, cooperative units responsible for the development and implementation of the Arkansas Part C Program.

- Program Management
- Fiscal Management
- Comprehensive System of Professional Development Management
- Quality Assurance/ Monitoring Licensure and Certification Management.
- Data Management

Personnel within the distinctive units develop, review, evaluate, and coordinate all aspects of the Arkansas Part C program. The staff work collaboratively to ensure that Arkansas Early Intervention Service (AEIS) providers and agency staff perform in accordance with federal regulations and state policy.

Part C has Voucher/Provider Agreements with local early intervention programs to provide supports/services on behalf of First Connections. The actions of the Part C program are led by the state's general supervision system that supports AEIS providers through training and technical assistance by program administrative oversite to ensure compliance.

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General Supervision System:

The systems that are in place to ensure that IDEA Part C requirements are met, e.g., monitoring systems, dispute resolution systems.

Arkansas Department of Human Services, Division of Developmental Disability Services, is the lead agency for the supervision and implementation of the Part C statewide comprehensive program. The state's General Supervision System is governed by agency procedures and policies and that are aligned with the federal regulations to ensure that Arkansas Early Intervention Service (AEIS) programs meet federal and state requirements.

Part C Quality Assurance/Monitoring Unit provides oversight and monitoring of local early intervention providers to ensure that quality and compliance requirements are met. The Quality Assurance/Monitoring staff used the Comprehensive Data System (CDS) to review individual child records to ensure compliance with federal timelines and other program requirements. First Connections monitoring process includes a review of AEIS providers records. This examination involves an extensive review of their files, while, providers with ongoing concerns receive onsite technical assistance visits.

In addition to the general supervision activities listed above. Arkansas Part C staff also perform various monitoring activities for each AEIS provider to ensure the practices required under IDEA. This allows agency staff to identify additional areas that may need technical assistance. Annual activities include the following:

- * Public Reporting of SPP/APR data
- * Verification of data for the SPPVAPR compliance and results indicator
- * Issuing findings of noncompliance and confirming correction of noncompliance
- * Determination for local programs in meeting the requirements of IDEA
- * Collection and Analysis of program data

First Connections Administrative staff developed monitoring tools to guide the QAMonitoring staff in performing a comprehensive assessment of the AEIS provider files. As required, monitoring staff also conduct activities that assist in improving the Part C program. Additional activities that include the evaluation of fiscal documents to determine program accountability with state and federal requirements. Local agencies are provided all available resources to increase their capacity to improve overall performance. Additional intensive and targeted activities are implemented when concerns are identified and may include required specialized professional development to support provider efforts to improve results for infants and toddlers that they serve.

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Technical Assistance System:

The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to early intervention service (EIS) programs.

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Technical Assistance (TA) is provided through various systems within the Part C program. During the fiscal year, each unit (CSPD, QA/Monitoring, Data, Program Management and Fiscal) provides technical assistance related to their specific content area as needed. Provider support is a unified effort that guides staff and providers in building their capacity to serve Arkansas families. The Professional Development System section of the APR includes an outline of the units' collaborative efforts to provide technical assistance. The different units meet together on a regular basis, discuss issues, examine program data to identify strengths and needs and to develop goals to improve program quality.

Part C's technical assistance is geared toward the precise needs of the local providers. Assistance is determined in an array of ways: AEIS providers submit TA request, QA monitor identified need, AEIS provider survey; fiscal unit identified need: data unit identified need: service coordinator identified areas of concern.

First Connections staff members provide assistance in a variety of ways:

- QA may require TA on a topic of identified need as part of a Corrective Action Plan (CAP) when a provider or provider program is out of compliance. The provider or provider organization is given a time limit by which to complete the TA.
- QA monitor may recommend TA on a topic of identified need and provide self-study guides developed by the CSPD Unit on that topic.
- Lead Agency issues written policy briefs or clarifications on identified issues.
- QA monitor may recommend TA on a topic of identified need (based on provider questions and/or minor inconsistencies in files reviewed) and refer the provider administration to contact the CSPD Unit for individualized on-site or Web-based TA.
- Quarterly First Connections' staff meeting where topical training is delivered face to face as part of each staff meeting. Staff needs are identified collaboratively by program unit managers: the state service coordinators, QA Unit, Fiscal Unit, and Data Unit based on recurring errors noted, record review, parent or provider complaints, and staff TA requests/questions.
- By El professional's request (phone call or e-mail to the Data Unit, QA Unit, CSPD Unit, or Fiscal Unit). TA may include electronic self-study guides, Web training, routing individual or group to a regularly scheduled workshop, scheduling an onsite TA visit for staff, one-on-one assistance (provider comes to office for tutorial or AEI professional and TA provider connects via phone and computer screen-sharing for guided assistance)
- CSPD Unit maintains a quarterly provider newsletter, Connections. The 4-page quarterly newsletter features articles on best practices, latest research, policy changes or clarifying points of misunderstanding, frequently asked questions, and upcoming professional development opportunities.
- CSPD Unit develops a one-hour "Lunch and Learn" webinars on a frequently asked question/topic and posts the TA offering on the training calendar in the database accessible to all AEI professionals, then notifies each of the unit personnel so that they can recommend the webinar to those with an interest and/or need.
- FC Staff/Peer support is provided by four "Coaches" who received initial (and ongoing training) to serve as peer mentors who use a strengths-based approach to support their coworker's ongoing professional development.

The CSPD Unit provides information for professionals outside of the Part C system to support parents/parent advocacy groups, referral sources, and related agencies. Technical Assistance of this nature is provided to support partners, related organizations, or other agencies requesting information from Part C. The TA varies, but generally is centered around understanding Part C and how to make referrals, family rights under IDEA, Part C timelines/process from referral to completed IFSP, Program guidelines/requirements around supporting families of toddlers transitioning out of Part C to other appropriate early learning programs/services. Examples of sessions include: "Family Rights under IDEA" training to early childhood special education students at Henderson State University's Teachers College and "Screening and When to Refer" to Early Head Start programs around the state of Arkansas.

Part C continues to receive high quality Technical Assistance and valuable resources from our national partners: Early Childhood Technical Assistance Center (ECTA Center), IDEA Early Childhood Data System (DaSy), IDEA Data Center (IDC), and National Center for Systemic Improvement (NCSI).

Throughout the reporting period, Lead Agency staff have benefited from conference calls, webinars, and other professional development opportunities made available through OSEP and OSEP national technical assistance programs. Several years ago, First Connections assembled an "Improving Family Outcomes Team" consisting of the Part C Coordinator, CSPD Unit Manager, Data Unit

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Professional Development System:

The mechanisms the State has in place to ensure that service providers are effectively providing services that improve results for infants and toddlers with disabilities and their families.

Arkansas' Comprehensive System of Personnel Development (CSPD) ensures that AEIS providers and service coordinators are effectively providing supports that improve results for infants and toddlers with disabilities and their families.

Part C professional development activities strive to ensure accountability and promote the use of recommended and evidence-based practices. First Connections' professional development unit main objective is to provide El professionals (AEIS providers, service coordinators, and El program administration) with the tools, confidence, and competence to equip them to support families in helping their child develop and learn (our SSIP SiMR). In order to meet this objective, Part C professional development activities seek to support providers in meeting program requirements (compliance), while also supporting El practitioners in providing quality family-centered supports and services to elicible infants and toddlers and their families, as required in IDEA.

First Connections Comprehensive System of Personnel Development (CSPD) involves many organized elements that include: policy development, developing PD and TA around provider requests and/or program identified needs, coordinating staff development/in-service, providing PD and TA in a variety of formats (self-study guides, lunchtime live webinars, web-based training modules, onsite TA, and face to face workshops), developing training to prepare El practitioners to serve as peer mentors/coaches, and developing tools (for example, a Transition Checklist) based on identified need.

The Professional Development Unit Manager ensures that First Connections (FC) PD and TA is high-quality and evidence-based training. CSPD staff and TA providers from other FC units reference the philosophy and guiding principles of Early Intervention, IDEA guidelines, First Connections policy & procedures, and DEC Recommended Practices in all training materials, QA sessions/discussions, and written responses. Arkansas' CSPD Unit staff is supported by program administration in maintaining their own professional development in order to stay abreast of current trends in the field of early learning/early intervention; staff is provided current literature on routines-based intervention, principles and practices of natural environment, family engagement, and coaching/consultative approaches in early intervention. Part C staff has received training in principles of adult learning as well as principles of peer to peer coaching. Professional development and TA workshops and webinars are comprised of a combination of lecture (with visual representations in the form of screen shots, diagrams, graphs, videos), reflective activities, self-assessments, discussion, and "putting it into practice" (application activities) to support adult learning. Attendees of the workshops and webinars are provided "take-away" copies of slides, handouts, and additional resources and references to extend learning and supplement presentations.

Formal and informal assessment are conducted to define personnel development needs and pre and post assessments used to gauge the effectiveness of training. Personnel within the CSPD unit participate in record review and review EI providers questions and/or complaints to determine program PD/TA needs. CSPD collaborates with other units within First Connections to maintain awareness of program needs in areas of compliance and quality. Lead Agency staff develop new courses and/or materials and existing professional development courses are revised/updated on the occasion, including:

- a. state or federal policy requirement changes
- b. report of identified topical need from one or more units
- c. needed improvement based on OSEP DMR and/or Determination
- d. provider(s) requests for more in-depth information and frequent questions related to policy or procedure
- e. SSIP strategy implementation/focus areas require a change or more in-depth coverage of a procedure, topic, etc.
- f. new information is obtained on principles/best practices from a national TA partner, a Part C-related webinar or conference, and/or from CSPD Unit research

Examples of course updates, as in "c" above, include the DMR notification that indicated a need for improvement in the area of Child Find. The CSPD Unit used the First Connections Child Find Plan for improvement and used the SSIP strategies around "remarketing the program" to develop a brief El Orientation training geared to primary referral sources. CSPD staff collaborated with Arkansas' Children's Hospital (ACH) to identify which individuals would benefit from this information. ACH administered a survey in 2017 and again in 2018 to determine areas of strength and need around the pediatric professional's knowledge of when/how to refer to Part C.

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CSPD is currently working with ACH administration to schedule dates/times/locations to provide a follow up "El Orientation" through a state-wide televised/recorded "Peds Place" for hospital staff such as social workers, NICU nurses, and other clinicians in early 2019.

Also, when re-training all First Connections staff, the CSPD unit noticed discrepancies in the way IFSP teams used existing tools to complete the COS process with families. The issues noted in training simulations and in observations of teams in the field supported and verified reports from the Data Unit. A provider focus group was formed and observed doing a simulated COS rating and then consulted to provide feedback on their methods, strategies, and use of state-approved tools. Through input from the provider focus group, further edits were made to the language of the existing tools and the paper COS form to make them more "user friendly" and easier for practitioners to explain to family members. A guidance document on how to use the tools was also created at the suggestion of providers who participated.

First Connections CSPD work is informed by partnership with the Quality Assurance/Certification and Licensure Unit. Collaboration between the CSPD and Certification and Licensure team members identified a need for all personnel working within the Part C program to have "core competencies." A cross-unit group within First Connections identified the core competencies and developed an online training module. This module was used to orient direct service providers, provider program administration, and service coordinators to changes in the Part C program, program requirements, and to introduce the core competencies. This online course is a pre-requisite for a newly developed two-day certification training (face to face workshop) on the core competencies. Early Intervention Specialists must complete an assessment following both the online prerequisite module and the two-day certification workshop with at least 70% accuracy to receive credit for these professional development activities.

The CSPD Unit provided additional training to support EI practitioners who had completed initial training to serve as peer mentors/coaches and also prepared a second cohort of peer mentors/coaches to provide peer to peer support for FC state staff. Practitioners in each cohort receive monthly training and complete and submit "Putting it into Practice" activities each month to apply key skills that have learned. The CSPD Unit reviews and provides feedback to peer coaches and uses the information to shape follow up training activities.

In this reporting year, the CSPD developed an informational handout for parents interested in serving on the AICC or local Interagency Coordinating Councils.

The CSPD unit is in the process of developing a pre-recorded online Webinar for provider programs interested in becoming Part C providers to help them self-assess readiness to serve the program. This tool is designed to orient and to prepare programs prior to their application to become Part C providers.

To support EI practitioners in topics identified by the Data Unit and the QA Unit as areas of low performance or areas in which providers contact these units with frequent questions, the CSPD Unit conducted quarterly "Lunch and Learn" live Web TA geared to provider program administration, service coordinators, and direct service providers. Targeted TA courses do not have a post-assessment and are not part of the required courses for certification/licensure. Lunch and Learn targeted TA offerings included: Referrals and Timelines, Delivered Services Notes (Documentation), Parent Goals on the IFSP, and Using Results of Family Assessment to Develop a Family-centered IFSP.

Based on data and information from the Data, Fiscal, and Quality Assurance Units, the CSPD provides onsite targeted TA to meet identified needs from monitoring reports. The QA Unit provides the CSPD Unit with copies of monitoring reports whenever a quality and/or compliance issue is documented on a provider's report; when Fiscal or Data Unit requires a provider program to participate in targeted TA, that unit's manager will send the identified topics and the request to the CSPD unit. The CSPD Unit then uses this information to work with the provider program administration to develop an agenda around the identified needs. CSPD Unit staff will either provide targeted TA via Webinar or on-site visit. CSPD staff provide the slides, notes, and sign in sheets to the referring unit for their documentation of TA completed. Provider programs referred for targeted TA have the option to request quarterly follow up after they have participated in required TA.

To serve the entire state network of EI professionals more effectively, much training is provided via live Webinars, Web-based training modules, guided individual tutorials (connected by phone and PC screen sharing), phone/chat/email consultation and Q/A, and self-study guides. Training on more complex topics and many of the courses required for certification and/or licensure are delivered in traditional face to face workshops that employ adult learning strategies including small and large group discussion, reflection, and small group simulated training activities around case studies. Feedback from El professionals who have participated in face to face workshops is used to inform planning of future PD and TA offerings. Feedback on the content and quality of face to face workshops is obtained from participants by requiring them to complete an anonymous paper course evaluation form. The course evaluation form requires the practitioner to rate the usefulness of the information, the quality of the materials/presentation, and skills of the trainer. The form also provides space for the practitioner to write in suggestions for improvement and/or to identify other needed topics for future PD/TA.

El Professionals gain access to the training calendar through the Comprehensive Data System. The system provides details of upcoming PD or TA opportunities, and specialists can register for the support in the CDS. First Connections training calendar is updated quarterly and lists all scheduled PD and TA opportunities. Regularly scheduled face to face workshops for certification training and/or ongoing professional development include: Transition, Best Practices in Case Management/Service Coordination, Best Practices for Intake, OSEP Child and Family Outcomes, Child & Family Assessment and Using Results of Family Assessment to Develop a Functional IFSP, Writing Functional Outcomes, Prior Authorization (fiscal), Report Writing, Evaluation Interpretation, IFSP Team Teamwork in Completing the COSF, IFSP Development & Ongoing Review, Transition and Exit Requirements.

Additionally, the Data Unit provides bi-annual (or more often as needed) "train the trainer" interactive workshops on using the Comprehensive Data System (CDS) so that staff from each provider organization can attend the two-day certification workshop and go back to support their staff in appropriate use of the State-approved data system (CDS).

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Stakeholder Involvement: Apply this to all Part C results indicators

The mechanism for soliciting broad stakeholder input on targets in the SPP, including revisions to targets.

The Arkansas Annual Performance Report was developed with extensive stakeholder input, as required. Arkansas' State Interagency Coordinating Council (AICC) continues to provide on-going guidance and support as the primary stakeholder group for the Part C program. During the reporting period, council members are giving various opportunities to provide program improvement input. Lead Agency staff provide updates with AICC members via emails, newsletters, webinars and meetings. Data summaries are presented to council member on regular intervals, to keep members updated regarding indicator progress. Throughout the review period, the AICC assisted the lead agency on the SPP/APR, SIPP, professional development activities, data requirements, monitoring, fiscal and program improvements strategies.

The First Connections program collaborated with several partners during this reporting period. Partners include: Arkansas' Children's Hospital, Quality Assurance Sub Committee Arkansas Department of Health, Arkansas Medicaid, Arkansas Department of Education, Safe Babies Court Team, Arkansas Association for Infant Mental Health, Arkansas Fetal Alcohol Spectrum Disorder, Head Start Association, Title V, Human Services Personnel Office, Arkansas School for the Deaf, Arkansas Early Intervention Providers, Zero to Three, the Division of Child Care and Early Childhood Education, Division of Children and Family Services, Arkansas Disability Coalition and the Division of Developmental Disabilities Services.

In this reporting period, Arkansas received an OSEP TA Visit that was instrumental in forging a more effective working relationship with the State's MIECHV program who met with our OSEP visitors and the Part C program to talk about ways to collaborate more effectively to support families, particularly in rural or underserved areas.

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Reporting to the Public:

How and where the State reported to the public on the FFY 2016 performance of each EIS Program or Provider located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2016 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2016 APR in 2018, is available.

The SPP/APR can be found on the Arkansas First Connections website at www.arkansas.gov/dhs/ddds/FirstConn. As required, no later than 120 days following the submission of the 2016 APR, the Lead Agency has reported 8/2/2019

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) and made available the public data from the 2016 APR. AEIS provider report cards posted on the state's website displays the performance of each local early intervention program and status in meeting the state's rigorous targets. First Connections QA/ Monitoring staff completed annual determinations for all Arkansas Early Intervention Service providers, as required.

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Actions required in FFY 2016 response

OSEP Response

States were instructed to submit Phase III Year Three of the State Systemic Improvement Plan (SSIP) by April 1, 2019. The State provided the required information.

Required Actions

In the FFY 2018 SPP/APR, the State must report FFY 2018 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year 4; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2019); (3) a summary of the SSIP's coherent improvement strategies, including infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short- and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities are impacting the State's capacity to improve its SiMR data.

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 1: Timely provision of services

Monitoring Priority: Early Intervention Services In Natural Environments

Compliance indicator: Percent of infants and toddlers with Individual Family Service Plans (IFSPs) who receive the early intervention services on their IFSPs in a timely manner.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		94.90%	77.00%	88.40%	82.00%	95.00%	90.00%	91.00%	91.00%	88.52%	93.00%

FFY	2015	2016
Target	100%	100%
Data	92.70%	88.62%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

FFY 2017 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
387	471	88.62%	100%	92.36%

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of infants and toddlers with IFSPs who receive their early intervention services on their IFSPs in a timely manner" field above to calculate the numerator for this indicator.

48

Include your State's criteria for "timely" receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).

The Lead Agency defines timely as 30 days from the date that the provider signed consent for services on the IFSP. Arkansas Part C requires that services be implemented as soon as possible (but not later than 30 days) from consent. This includes the initial IFSP as well as services added at a later date.

What is the source of the data provided for this indicator?

State monitoring

State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

The Arkansas' Part C program selected the time period of February 1- April 30, 2018 to collect data to represent reporting for the full fiscal year. (2017)

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

The First Connections Comprehensive Data System was developed to collect and display data that accurately reflects the status of the infant and toddlers record at any given period of time. Data Unit staff have direct access to individual electronic record of each AEIS provider that allows appropriate staff to provide clarification and guidance and to address provider concerns connected to the families that they provide direct support. Arkansas data system allows for a direct flow of information from each user in the system. As part of the child's record, the Comprehensive Data System includes, the start date of the IFSP and the first date of service that the child received as indicated on the Individualized Family Service Plan.

Data for Indicator 1 was collected from the Comprehensive Data System (CDS). The inquiry process was used by the First Connections Data staff to authenticate the data gathered in the states comprehensive system.

Program data is collected from local service providers and state service coordinators for proper analysis. AEIS providers and agency staff use the Comprehensive Data System to report data on the infants and toddlers that are assigned to their caseload. The data system is used by service coordinators and early intervention provider to generate an electronic file for each infant and toddler that is served under Arkansas Part C.

First Connections Data Unit collects data from IFSP's with dates starting at February 1-April 30, 2018. Program staff sent personalized information to each AEIS provider and state service coordinator for verification and submission to Part C. The Data Manager selected this period of time to ensure the highest quality of provider data. Arkansas selected the period of time closest to the end of the year to give new AEIS providers and state service coordinators additional time to improve their ability to manage the complexity of the data system. In addition, the Data Manager was given sufficient time to validate the information. First Connection Data Unit staff reviewed the information that was collected for this time period to data for the full year (FFY2017) and established that it is representative of a full year of the state's data because the data includes all areas of the state, all provider types and all categories of eligible infants and toddlers.

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Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified Findings of Noncompliance Verified as Corrected Within One Year		Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected	
	2	1	1	0

FFY 2016 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

The correction of a noncompliance is monitored by Part C monitoring staff. Upon the identification of noncompliance, the staff issue the AEIS provider a written finding of noncompliance citing the regulatory requirement and requiring correction of the noncompliance within 90 days of notification.

In accordance with Arkansas' monitoring guidelines related to timely provision of services, monitoring staff examine a percentage of early intervention provider files to ensure that all infants and toddlers receive services listed on the IFSP within 30 days of the parental consent for services.

To ensure programs are correctly implementing the regulatory requirements, First Connections staff reviewed a percentage of updated files from each AEIS provider to determine if providers are initiating services of subsequent infants and toddlers in a timely manner. The Lead Agency staff conducted this procedure in accordance with guidance provided in OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Arkansas Part C monitoring staff determined that each AEIS provider for whom data formerly showed noncompliance has corrected the noncompliance and is correctively implementing the regulatory requirement for infants and toddlers with IFSPs to receive their services as directed.

Describe how the State verified that each individual case of noncompliance was corrected

Each individual record for whom services were not started within 30 days of parents' consent, is reviewed by the monitoring staff to ensure that children were receiving services as written on their IFSP. Lead Agency record review indicated that children who had not previously received timely services were indeed receiving the services on the IFSP, even though late.

FFY 2015 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

The correction of a noncompliance is monitored by Part C monitoring staff. Upon the identification of noncompliance, the staff issue the AEIS provider a written finding of noncompliance citing the regulatory requirement and requiring correction of the noncompliance within 90 days of notification.

In accordance with Arkansas' monitoring guidelines related to timely provision of services, monitoring staff examine a percentage of early intervention provider files to ensure that all infants and toddlers receive services listed on the IFSP within 30 days of the parental consent for services.

To ensure programs are correctly implementing the regulatory requirements, First Connections staff reviewed a percentage of updated files from each AEIS provider to determine if providers are initiating services of subsequent infants and toddlers in a timely manner. The Lead Agency staff conducted this procedure in accordance with guidance provided in OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). Arkansas Part C monitoring staff determined that each AEIS provider for whom data formerly showed noncompliance has corrected the noncompliance and is correctively implementing the regulatory requirement for infants and toddlers with IFSPs to receive their services as directed.

Describe how the State verified that each individual case of noncompliance was corrected

Each individual record for whom services were not started within 30 days of parents' consent, is reviewed by the monitoring staff to ensure that children were receiving services as written on their IFSP. Lead Agency record review indicated that children who had not previously received timely services were indeed receiving the services on the IFSP, even though late.

OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2017-June 30, 2018). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

Because the State reported less than 100% compliance for FFY 2017, the State must report on the status of correction of noncompliance identified in FFY 2017 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2018 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2017 for this indicator. (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2018 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2017. although its FFY 2017 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2017.

Required Actions

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 2: Services in Natural Environments

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			64.00%	68.00%	70.00%	72.00%	45.50%	45.75%	46.00%	70.00%	73.00%
Data		62.95%	52.72%	46.00%	42.00%	45.00%	38.00%	32.00%	33.00%	74.38%	74.48%

FFY	2015	2016
Target≥	76.00%	79.00%
Data	76.28%	83.91%

Key:		Gray - Data Prior to Baseline		Yellow - Baseline	Blue – Data Update
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FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	82.00%	85.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	e	Date	Description	Data	Overwrite Data
SY 2017-18 Child Co Environment Da		7/11/2018	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	852	
SY 2017-18 Child Co Environment Da		7/11/2018	Total number of infants and toddlers with IFSPs	945	

FFY 2017 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of infants and toddlers with IFSPs	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
852	945	83.91%	82.00%	90.16%

Actions required in FFY 2016 response		
none		
OSEP Response		

Required Actions

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 3: Early Childhood Outcomes

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: Percent of infants and toddlers with IFSPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication); and
- C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Does your State's Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or "at-risk infants and toddlers") under IDEA section 632(5)(B)(i)? No

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A1	2008	Target≥						56.50%	56.75%	56.00%	56.25%	60.00%	61.00%
AI	2008	Data					56.00%	67.00%	66.00%	70.00%	59.00%	68.13%	81.93%
A2	2008	Target≥						24.50%	24.75%	25.00%	25.25%	30.00%	31.00%
AZ	2006	Data					24.00%	23.00%	25.00%	41.00%	22.00%	32.49%	46.99%
B1	2008	Target≥						52.50%	52.75%	53.00%	53.25%	63.00%	62.00%
В	2006	Data					53.00%	65.00%	64.00%	69.00%	60.00%	68.52%	71.79%
B2	2008	Target≥						20.50%	20.75%	21.00%	21.25%	28.00%	30.00%
DZ.	2006	Data					20.00%	23.00%	25.00%	39.00%	21.00%	34.32%	39.84%
C1	2008	Target≥						56.25%	56.50%	56.75%	57.00%	60.00%	61.00%
Ci	2008	Data					56.00%	65.00%	64.00%	69.00%	58.00%	66.28%	79.01%
C2	2008	Target≥						22.50%	22.75%	23.00%	23.25%	28.00%	30.00%
C2	2008	Data					22.00%	21.00%	26.00%	41.00%	23.00%	34.50%	41.46%

	FFY	2015	2016
A1	Target≥	62.00%	63.00%
Ai	Data	64.34%	86.36%
A2	Target≥	31.25%	31.50%
AZ	Data	42.90%	47.90%
B1	Target≥	62.50%	62.75%
В	Data	67.01%	87.28%
	Target≥	31.00%	33.00%
B2	Data	36.91%	40.81%
C1	Target≥	62.75%	63.00%
Ci	Data	65.83%	87.95%
C2	Target≥	32.00%	33.00%
G2	Data	42.43%	49.35%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target A1 ≥	64.00%	65.00%
Target A2 ≥	31.75%	32.00%
Target B1 ≥	62.75%	63.00%
Target B2 ≥	33.00%	34.00%
Target C1 ≥	63.00%	63.25%
Target C2 ≥	33.00%	34.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

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FFY 2017 SPP/APR Data

Number of infants and toddlers with IFSPs assessed	746.00

Outcome A: Positive social-emotional skills (including social relationships)

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	4	0.54%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	132	17.69%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	226	30.29%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	308	41.29%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	76	10.19%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program (c+d)/(a+b+c+d).	534.00	670.00	86.36%	64.00%	79.70%
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program (d+e)/(a+b+c+d+e).	384.00	746.00	47.90%	31.75%	51.47%

Outcome B. Acquisition and use of knowledge and skills (including early language/ communication)

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	4	0.54%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	180	24.13%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	243	32.57%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	269	36.06%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	50	6.70%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program (c+d)/(a+b+c+d).	512.00	696.00	87.28%	62.75%	73.56%
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program (d+e)/(a+b+c+d+e).	319.00	746.00	40.81%	33.00%	42.76%

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	6	0.80%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	159	21.31%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	225	30.16%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	285	38.20%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	71	9.52%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program (c+d)/(a+b+c+d).	510.00	675.00	87.95%	63.00%	75.56%
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program (d+e)/(a+b+c+d+e).	356.00	746.00	49.35%	33.00%	47.72%

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The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's part C exiting 618 data	798
The number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.	52
ease note that this data about the number of infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program is optional in this FFY16 the FFY17 submission.	submission. It will be requir
as sampling used? No	
id you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS) process? Yes	
ist the instruments and procedures used to gather data for this indicator.	
The instruments used were the exiting data along with the child outcomes survey data. We compared the two sets of data making sure that we had a survey for every child that exited and who met ervices for at least six months.	the criteria of receiving
ctions required in FFY 2016 response	
one	
SEP Response	

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) **Indicator 4: Family Involvement**

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
 C. Help their children develop and learn.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
	2000	Target≥					77.00%	78.00%	80.00%	80.25%	80.25%	80.00%	82.00%
A	2006	Data			59.00%	62.00%	65.10%	65.00%	67.90%	64.20%	68.00%	75.00%	78.96%
	0000	Target≥					67.00%	68.00%	70.00%	70.25%	70.25%	80.00%	82.00%
В	2006	Data			70.00%	67.50%	70.30%	69.00%	71.30%	67.90%	71.00%	81.00%	81.84%
	0000	Target≥					84.00%	85.00%	87.00%	87.25%	87.25%	80.00%	82.00%
'	2006	Data			71.00%	70.80%	72.80%	73.00%	75.90%	73.20%	75.00%	80.00%	87.84%

		FFY	2015	2016
	Α	Target≥	84.00%	86.00%
	^	Data	81.24%	81.19%
ſ	В	Target≥	84.00%	86.00%
	В	Data	85.55%	89.16%
ſ	С	Target≥	84.00%	86.00%
L		Data	85.55%	89.16%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target A ≥	88.00%	90.00%
Target B ≥	88.00%	90.00%
Target C ≥	88.00%	90.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

FFY 2017 SPP/APR Data

Number of families to whom surveys were distributed	1,750
Number of respondent families participating in Part C 22.00%	385
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	317
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	382
B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	333
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	379
C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	333
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	383

	FFY 2016	FFY 2017	FFY 2017
	Data	Target	Data
A. Percent of families participating in Part C who report that early intervention services have helped the family know their	81.19%	88.00%	82.98%

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Repo	ort (APR)		
	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
rights			
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	89.16%	88.00%	87.86%
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn	89.16%	88.00%	86.95%
Reasons for B Slippage			
The Data Manager examined information received from Arkansas families related to the percentage of families participating in their children's needs. Data comparisons between FFY 2016 and FFY 2017 showed a slight decrease in the overall percent of needs of their children. Analysis conducted by the Lead Agency indicated that families reported that early intervention has done family need additional supports fully meet their expectations. Arkansas Part C will continue to make every effort to ensure that their abilities to support families.	parents that reporte a good job of helpi	ed that early inter ing them effective	vention services ha

Arkansas Part C Data Unit staff reviewed information from the Family Outcome Survey analysis report regarding the percentage of families' participation in Part C who reported that early intervention services have helped the family help their children develop and learn. Summary data indicated that Arkansas Part C parents have learned a lot, but still need or want additional support. First Connections Professional Development team along with other program staff will continue to provide targeted training and assistance to local AEIS provider and state staff. As part of the states SSIP work, staff developed materials and documents that can be used with families. First Connections staff will make sure that providers are aware of these supports and how to implement them as required.

Was sampling used? No

Reasons for C Slippage

Was a collection tool used? Yes Is it a new or revised collection tool? No

The demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.

Yes

Include the State's analysis of the extent to which the demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.

During the reporting period, Arkansas Part C staff distributed over 1750 surveys to families of infants and toddlers with active IFSPs. Parents of the Part C program were given numerous opportunities to respond to the family survey, hard copy via mail, telephone and the First Connections website. The following demographics were collected from all respondents: county of residence, race and ethnicity, and child's AEIS provider. Arkansas First Connections received survey responses from all 75 counties in the state which shows representation of all areas of the state by race and ethnicity categories of the population of families in the Arkansas Part C program.

Actions required in FFY 2016 response	
none	
0050.0	
OSEP Response	
Required Actions	

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 5: Child Find (Birth to One)

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 1 with IFSPs compared to national data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			0.42%	0.45%	0.66%	0.55%	0.55%	0.57%	0.58%	0.45%	0.45%
Data		0.39%	1.02%	0.72%	0.66%	0.61%	0.96%	0.85%	1.01%	0.44%	0.36%

FFY	2015	2016		
Target ≥	0.47%	0.48%		
Data	1.56%	1.10%		

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	0.49%	0.50%

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups 7/11/2018		Number of infants and toddlers birth to 1 with IFSPs	247	null
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2017	6/12/2018	Population of infants and toddlers birth to 1	37,966	null

FFY 2017 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	ofants and toddlers birth to 1 with IFSPs Population of infants and toddlers birth to 1		FFY 2017 Target	FFY 2017 Data
247	37,966	1.10%	0.49%	0.65%

Compare your results to the national data

The Lead Agency continues to make every effort to identity children to support under Part C of IDEA as early as possible. Arkansas will continue to implement strategies to increase awareness of the importance of early intervention. Lead Agency staff developed a Child Find Plan with several phases of implementation to guide the state in the steps to increase the number of infants served in Arkansas. First Connections served 0.65 percent of the population of children (0-1) compared to the national average of 1.25. As part of further evaluation, Arkansas reviewed the child count and compared data across several states with similar demographics: AL, GA, MS, TN, KY, SC. Except for Tennessee, the other states serve less than one percent birth to one. While the percentages for children under age 1 are low for those states, Arkansas child find remains a challenge. There remains work to be done regarding this indicator. Arkansas Part C will participate in a newly created Child Find committee whose first task will be to review and address the child find process in Arkansas and to develop a Child Find manual.

Provide additional information about this indicator (optional)

The Lead Agency will continue to implement actions to improve program data. A summary of the Child Find Plan is listed below:

Proposed strategy Rationale Status

"Learn the Signs"/Act Early Poster with Part C contact information in the lobby of each county DHS office and each county WIC office

Public awareness of importance of early intervention when milestones are missed and how to contact Part C. Low-income expectant mothers and parents of infants visit WIC offices and county DHS offices as second attempt for approval. Will initial approval to the processing part of th for related services.

Contraction fasticists, page with El Information in Captage page was first and part and young grantpassers' Leve media to first firmation. Pert C Child Find Committee Pert C Child Find Com	Cable PSA	Plan (SPP)/Annual Performance Report (APR) Public awareness of importance of early intervention when milestones are missed and how to refer to Part C. Cable reaches a broad audience.	Delayed – Require additional state level approval. Will initiate second attempt for approval.
Part C Outside Find Committee Second agent would result in cames agents y exhibitions from the has been bedraged and the drawing within his In Process- Working with ACC and other Statistical Committee. Part C Outside Find Committee Find Committee. Part C Outside Find Committee Find Committ	Henderson State University Teacher's College hosts a First Connections Facebook page with EI information for parents and the public.	Today's parents and "young grandparents" use media to find information.	
Part C Outseach Personnel Some and other related open of which or thorse it owners in a practice (who in row #2 in Development Part C part at state related in a nature approach (who in row #2 in Development Part C part and the related open of th	Part C Child Find Committee	year of age would result in cross-agency collaboration that has been lacking due to changes within the	e In Process- Working with AICC and other Stakeholders
Collaboration with DCECE and/or the Preschool Supervisor-Equition 18ak Force to establish a design of the Preschool Supervisor-Equition 18ak Force to establish a design of the Preschool Supervisor-Equition 18ak Force to establish and only only procedure for the preschool Supervisor-Equition 18ak Force to establish and only procedure for the preschool supervisor-Equition 18ak Force to establish and only procedure for the preschool supervisor-Equition 18ak Force to establish and only procedure for the preschool supervisor-Equition 18ak Force to establish and only procedure for the preschool supervisor-Equition 18ak Force to establish and only procedure for the force of the preschool supervisor-Equition 18ak Force to establish and only procedure for the force of the preschool supervisor-Equition 18ak Force to establish and only procedure for the force of the force of the force of the preschool supervisor-Equition 18ak Force to establish and only procedure for the force of the force	Part C Outreach Personnel	"screening events" at WIC offices, attend events/host booths, speak to parent and parent advocacy groups and other related groups (with our new "El Overview" material), and represent Part C as a	In Process- Agency staff is participating in outreach activities
Childron who lack the ability to appropriately ment their noods may be operanning a developmental branch control for children facing suspension/disciplinary action Childron professionals need to understand when how to refer as well as understand their role on a right searly intervention seam and how to support the fearming of a child with a developmental delay in the disposition. Childron professionals need to understand when how to refer as well as understand their role on a right searly intervention seam and how to support the fearming of a child with a developmental delay in servention seam and how to support the fearming of a child with a developmental delay in servention seam and how to support the fearming of a child with a developmental delay in servention seam and how to support the fearming of a child with a developmental delay in servention seam and how to support the fearming of a child with a developmental delay in the fearming conducted \$2018. Fellow up meeting proposed with ACH its fell (role as sea, but with ACH being fearming conducted \$2018. Fellow up meeting proposed with ACH its fill (role as sea, but with ACH being fearming conducted \$2018. Fellow up meeting proposed with ACH its fill (role as sea, but with ACH being fearming conducted \$2018. Fellow up meeting proposed with ACH its fill (role as sea, but with ACH being fearming conducted \$2018. Fellow up meeting proposed with ACH its fill (role as sea, but with ACH being fearming conducted \$2018. Fellow up meeting proposed with ACH its fill (role and and disp another prediction) and of referral portion. FC provides information to MilECHV Home Visitors on referring to predict seal of the fearming and another prediction of the fearming and another predictions and addition of MilECHV propars to referral to make a decided or an addition of MilECHV propars to referral to make a sea of the fearming and another predictions. FC provides information to MilECHV Home Visitors on the fearming fearming fearming to the fearming and another predictions	Broad community outreach	Collaborate with the state to have a brief program overview attached to each tax bill.	Delayed- Will revisit the strategy at a later date
completed in Process- ACH survey staff in 2017 and 2018 compared the results to identify needs of the classroom. Completed in Process- ACH survey staff in 2017 and 2018 compared the results to identify needs; 1 ¹⁸ peak place broadcasted training continued 50218. Fiching the process are often the family's first source of information at the time of referral. Collaboration with ACH to outmach to physicians and improve referral sources' understand of Part C and how to refer. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Completed in Process- ACH survey staff in 2017 and 2018 compared with ACH that all (no cate set). Met with ACH that are all 2020 to the family and child and the tow agencies can support one another in assisting families, particularly in rural areas by working together rore effectively. MIEHCV provides information to MIECHV Home Visitors on referring to Part C Including the MIECHV Home Visitor on the family and child and the tow agencies can support one another in assisting families, particularly in rural areas by working together one offer the program and effectively. Sharing information and/or joint training strengthens EI and MIECHV professionals. Completed in Process- 1 2017 — roreation of a handout for parents referred by MIECHV AGN and the program and effectively. Sharing information and/or joint training strengthens EI and MIECHV professionals. Completed in Process- Agency staff attend meeting to provide information and critical roreating the parents referred by MIECHV AGN and the program and effectively. Sharing information and/or joint training strengthens EI and MIECHV professionals. Collaboration with EI-Hy Sharing provided by phone regarding main referral by a process- Agency staff attend meeting to provide information and resisting the radious provide information a	Suspension/Expulsion Task Force to establish a policy/procedure for referral to Part C for children facing		
broadcasted training conducted \$2018. Follow up meeting proposed with ACH the fall (not does all, Met with ACH to arrest sources' understand of Part C and how to refer. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information at the time of referral. Physicians are often the family's first source of information and or infor	DCCECE / Part C Joint training	child's early intervention team and how to support the learning of a child with a developmental delay in	
and dips in other areas around pediatric professionals' understanding of and referral to Part C. We discussed doing another Peds Place broadcasted training 2019 – no date set. Completed in Process - in 2017 – creation of a horse waitr referral form and addition of MIECHV program to referral so in CDS to track referrals – share data with MIECHV. FC provides information to MIECHV Home Visitors on referring to Part C. Including the MIECHV Home Visitor on the family's EI team benefits the family and child and the two agencies can support one another in assisting families, particularly in rural areas by working together MIECHV program and effectively. Sharing information and/or joint training strengthens EI and MIECHV professionals. Including the MIECHV Home Visitor on the family's EI team benefits the family and child and the two agencies can support one another in assisting families, particularly in rural areas by working together more effectively. Sharing information and/or joint training strengthens EI and MIECHV professionals. Foreign of FC program information/overview developed and shared with MIECHV 2012 Report information about with a Complete Process - 3 trainings at EHS programs 2017-2018 and Taylanning provided by phone regarding mentionals to Part C. Handbut developed for EHs to give to parents on feeling to primary referral source. EHS programs must meet a 10% quote for children with an IEPD put in some primary ref		Physicians are often the family's first source of information at the time of referral.	compared the results to identify needs. 1 st Peds Place broadcasted training conducted 5/2018. Follow up meeting proposed with ACH this fall (no date set). Met with ACH team 12/2018. We compared data from 2 nd ACH survey to data from
EC provides information to MIECHV Home Visitors on referring to Part C Including the MIECHV Home Visitor on the family's El team benefits the family and child and the two agencies can support one another in assisting families, particularly in rural areas by working together data with MIECHV professionals. Now to work together more effectively. Sharing information and/or joint training strengthens El and MIECHV professionals. Now to work together more effectively. Sharing information and/or joint training strengthens El and MIECHV professionals. New to work together more effectively. Sharing information and/or joint training strengthens El and MIECHV professionals. Serve as stakeholder on Safe Babies Court team meetings. Coalaboration with Zero to Three and the Safe Babies Court team could provide valuable support to vulnerable infants and toddlers in the Pulaski court system while increasing referrals in this area of the state. Completed/ in Process - In 2017 — creation of a home visiting referrals born activation of Will Condition of MIECHV program to Path to working together creation of Path Conducted meeting to discuss collaboration. Will continue efforts to strengthen partnership. Creation of FC program information/overview developed and shared with MIECHV 92/018. Program 20/17/20/18 and Taylpianning provided by phone regarding may referral source. EHS programs must meet a 10% quote for children with an IFSP but in some areas are not meeting their ratios. EHS programs conduct regular periodic screenings of all children and area primary referral source. EHS programs must meet a 10% quote for children with an IFSP but in some areas are not meeting their ratios. EHS programs conduct regular periodic screenings of all children with an IFSP but in some areas are not meeting to developed for EHS to give	total assures understand of fair of and now of total.		and dips in other areas around pediatric professionals' understanding of and referral to Part C.
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Plan to host a series of Lunch & Learn Webinars where reps for the state of the sta	Partner with EHS to provide joint training.	primary referral source. EHS programs must meet a 10% quote for children with an IFSP but in some areas are not meeting their ratios. EHS programs conduct regular periodic screenings of all children	2017-2018 and TA/planning provided by phone regarding mal referrals to Part C. Handout developed for EHS on referring t Part C. 2 nd Handout developed for EHS to give to parents on "now that I've been referred" 12/2017 – unsure if the handout was approved or if the handout was approved or if the handout was deposed to EHS or not. First
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	none		

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 6: Child Find (Birth to Three)

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 3 with IFSPs compared to national data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			2.25%	2.78%	2.30%	2.35%	2.37%	2.37%	2.37%	1.20%	1.30%
Data		2.25%	2.75%	2.34%	2.33%	2.19%	2.75%	2.73%	2.72%	1.19%	1.00%

FFY	2015	2016
Target≥	1.40%	1.50%
Data	1.74%	1.51%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	1.80%	1.90%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups	7/11/2018	Number of infants and toddlers birth to 3 with IFSPs	945	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2017	6/12/2018	Population of infants and toddlers birth to 3	115,242	

FFY 2017 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
945	115,242	1.51%	1.80%	0.82%

Reasons for Slippage

First Connections strives to improve the percentage of infants and toddlers birth to three served in the Part C program. As part of rebranding the Part C program, the Lead Agency designed materials and documents to provide guidance around the purpose of Part C. Further analysis indicated that some entities had additional need for clarification regarding the purpose and failed to initiate a referral, as required. Arkansas Part C has worked with some of the persons in question and provided additional technical assistance to ensure clarity. During the course of the fiscal year Lead Agency staff reviewed the strategies outlined in the Child Find Plan and worked with stakeholders to strengthen program initiatives. The proposed strategies range from improving public awareness activities, to working with University staff on using social media to reach families and collaborate with partners to develop and implement new policies and procedures. Progress related to the strategies included in the Child Find Plan vary from completed, in process, and delayed for a variety of reasons. Part C staff developed an outline of the Child Find Plan for the state Interagency Coordinating Council and asked for their guidance and supports as it relates to improving the programs percentages. The state anticipates the development of sub-committees and on-going collaborative effort to move the data in the right direction. Also, starting in 2018 Arkansas initiated new state policy requiring Early Intervention Day Treatment Centers to refer all children birth to three to the Part C program. The new policy should provide families with additional options for supports and increase the overall percentage of infants and toddlers served by First Connections. The Lead Agency will continue to implement actions to improve program data. A summary of activities are listed below:

Proposed strategy Rationale Status "Learn the Signs"/Act Early Poster with Part C contact Public awareness of importance of early intervention when milestones are missed and how to contact Part C. Low-income expectant mothers and parents of infants visit WIC offices and county DHS offices for related services.

information in the lobby of each county DHS office and each county WIC office for related services.

Public awareness of importance of early intervention when milestones are missed and how to refer to Delayed - Require additional state level approval. Will initiate Cable PSA Part C. Cable reaches a broad audience.

second attempt for approval.

Henderson State University Teacher's College hosts a First Connections Facebook page with EI information for parents and the public.

Today's parents and "young grandparents" use media to find information.

Delayed- Program required to submit information to the Lead Agency's Face Book account. Will work within the agency to complete this task.

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Part C Child Find Committee	year of age would result in cross-agency collaboration that has been lacking due to changes within the lead agency, personnel, etc.	In Process- Working with AICC and other Stakeholders
Part C Outreach Personnel	A dedicated staff member for outreach would be able to coordinate the Child Find Committee, host "screening events" at WIC offices, attend events/host booths, speak to parent and parent advocacy groups and other related groups (with our new "El Overview" material), and represent Part C as a stakeholder in other agencies (thus increasing collaboration/relationships with related agencies).	In Process- Agency staff is participating in outreach activit
Broad community outreach	Collaborate with the state to have a brief program overview attached to each tax bill.	Delayed- Will revisit the strategy at a later date
Collaboration with DCCECE and/or the Preschool Suspension/Expulsion Task Force to establish a policy/procedure for referral to Part C for children facing suspension/disciplinary action	Children who lack the ability to appropriately meet their needs may be experiencing a developmental delay and would benefit from a screening to rule out a developmental issue.	In Process- Agency staff will collaborate with partners to strengthen the referral process
DCCECE / Part C Joint training	Childcare professionals need to understand when/how to refer as well as understand their role on a child's early intervention team and how to support the learning of a child with a developmental delay in the classroom.	In Process- Agency staff will collaborate with partners to strengthen the referral process
Collaboration with ACH to outreach to physicians and improve referral sources' understand of Part C and how to refer.		Completed/In Process- ACH survey staff in 2017 and 201 compared the results to identify needs. 1 st Peds Place broadcasted training conducted 5/2018. Follow up meeting proposed with ACH this fall (no date set). Met with ACH tex 12/2018. We compared data from 2 nd ACH survey to data fr st ACH survey and saw a .5% improvement in a couple of and dips in other areas around pediatric professionals' understanding of and referral to Part C. We discussed doing another Peds Place broadcasted train 2019 – no date set.
FC provides information to MIECHV Home Visitors on referring to Part C MIEHCV provides information to Part C on their program and how to work together more effectively	Including the MIECHV Home Visitor on the family's EI team benefits the family and child and the two agencies can support one another in assisting families, particularly in rural areas by working together effectively. Sharing information and/or joint training strengthens EI and MIECHV professionals.	Completed/ In Process - In 2017 – creation of a home vis referral form and addition of MIECHV program to referral s in CDS to track referrals – share data with MIECHV. 9/2018- Conducted meeting to discuss collaboration. Will continue efforts to strengthen partnership. Creation of FC program information/overview for MIECHV visitors and creation of a handout for parents referred by MIECHV Home Visitor shared with MIECHV 9/2018. Program information/overview developed and shared with MIECHV 9, Handout for Home Visitor to give to parents referred was se 9/2018.
Serve as stakeholder on Safe Babies Court team meetings.	Collaboration with Zero to Three and the Safe Babies Court team could provide valuable support to vulnerable infants and toddlers in the Pulaski court system while increasing referrals in this area of the state.	In Process- Agency staff attend meeting to provide information and build partnerships.
Partner with EHS to provide joint training.	EHS classroom teachers often are the first to notice a developmental delay in young children and are a primary referral source. EHS programs must meet a 10% quote for children with an IFSP but in some areas are not meeting their ratios. EHS programs conduct regular periodic screenings of all children and need clear information about when and how to refer to Part C.	Connections will continue to develop and conduct Webinars
Compare your results to the national data		

Arkansas Part C makes every effort to identity children under Part C of IDEA. The Lead Agency will continue to implement strategies to increase awareness of the importance of early intervention. Lead Agency staff developed a Child Find Plan with several phases of implementation to guide the state in the steps to increase the number of infant and toddlers in Arkansas. First Connections served less than one percent of the population of children (0-3) compared to the national average of 3.26. As part of further evaluation, Arkansas reviewed the data and compared itself to states with similar demographics: AL, GA, MS, TN, KY, SC. Except for Tennessee, the other states serve less than one percent birth to one; however, the range of children served birth to three is from 1.85 (MS) to 3.08 (KY). There remains work to be done regarding this indicator. Therefore, Arkansas Part C will participate in a newly created Child Find committee whose first task will be to review and address the child find process in Arkansas and to develop a Child Find manual.

Actions	required	in	FFY	2016	response
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none

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)		
OSEP Response		
Required Actions		

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 7: 45-day timeline

Monitoring Priority: Effective General Supervision Part C / Child Find

Compliance indicator: Percent of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		75.80%	84.00%	88.00%	82.00%	99.00%	94.00%	92.00%	93.00%	88.11%	87.97%

FFY	2015	2016
Target	100%	100%
Data	92.41%	87.25%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

FFY 2017 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
180	319	87.25%	100%	83.07%

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline" field above to calculate the numerator for this indicator.

85

Reasons for Slippage

Program data related to the number of eligible infants and toddlers with IFSP's for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline decreased slightly from FFY2016. During the course of the fiscal year the state of Arkansas implemented a new electronic payment system for all provider types. The change from the old system to the new caused a delay in payment to providers for supports and services. Arkansas Part C has and will continue to work with the "new system" developers to ensure that the system is processing request as required. Also, First Connections staff provide intensive technical assistance to providers regarding the requirements outlined in Part C of IDEA. Lead Agency staff has developed data related strategies to support program improvement. The initiation of Data Camps where providers would be given their data and allowed time to review the stats and the state provide clarification and guidance is one of the leading suggestions for progress.

What is the source of the data provided for this indicator?

State monitoring

State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

Lead Agency staff collected data from January 1-March 30, 2018 to represent reporting for the full fiscal year. (2017)

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Information was gathered from the Comprehensive Data System, by the Part C Data Unit, to report the percentage of infants and toddlers receiving evaluations, assessments and IFSP meetings within the required timeframe. AEIS providers, along with the state staff, use the statewide data system to report data on children receiving supports and services. Arkansas developed the CDS to capture and display data that reflects the status of the infant and toddler early intervention file, on demand.

Individual data for each child's file, in CDS includes the following: the first date of service as indicated on the child's IFSP, and the date of the signed IFSP. Part C staff are allowed access to the AEIS providers electronic record to work together to assist in finding a means to address concerns surrounding the infants and toddlers that are assigned to their caseload. Program data is collected from Independent Service Providers, state service coordinators and License Community Programs. Data for children served in the Part C program was pulled for IFSP, with dates starting January 1- March 30, 2018 and sent to each AEIS provider for verification and submission. With close consideration and care, Part C selected this time period in order to capture the same children as reported in Indicator 1.

Under the guidance of the Data Manager, agency staff analyzed data to determine if the children who received their services in a timely manner also had an evaluation and assessment and IFSP developed in 45 days. In order to ensure the accuracy of the data, additional time and evaluation was given for validation and verification. The Data Manager conducted further analysis of all information regarding data that was reported for this time period to data for the full year (FFY 2017) and determined that it is reflective of a full year of data.

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
3	0	3	0

FFY 2016 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

Upon the identification of noncompliance, the AEIS provider is issued a written finding and are required to correct the noncompliance within 90 days. As part of the subsequent review, monitoring staff examined a percentage of new records to ensure that all infants and toddlers received evaluations, assessments and IFSP meetings in a timely manner.

As required, First Connections monitoring staff reviewed a percentage of updated files from each local provider to determine if subsequent infants and toddlers had an evaluation and an IFSP within the 45-day timeframe. Lead Agency staff completed this process in accordance with the guidance provided in OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). Part C Monitoring staff determined that each EIS provider, for whom data formerly showed non-compliance has corrected the noncompliance and is correctly implementing the regulatory requirement for infants and toddlers who receive evaluations, assessments and IFSP meetings within the required time.

Describe how the State verified that each individual case of noncompliance was corrected

Part C monitoring staff examined the individual child record of each infant or toddler who did not have an evaluation, assessment and IFSP meeting within 45 days. The review of records indicated that children who had not received evaluations, assessments and timely IFSP meeting sindeed had subsequently completed evaluation and the IFSP meeting was conducted, although late.

FFY 2015 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

Upon the identification of noncompliance, the AEIS provider is issued a written finding and are required to correct the noncompliance within 90 days. As part of the subsequent review, monitoring staff examined a percentage of new records to ensure that all infants and toddlers received evaluations, assessments and IFSP meetings in a timely manner.

As required, First Connections monitoring staff reviewed a percentage of updated files from each local provider to determine if subsequent infants and toddlers had an evaluation and an IFSP within the 45-day timeframe. Lead Agency staff completed this process in accordance with the guidance provided in OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). Part C Monitoring staff determined that each EIS provider, for whom data formerly showed non-compliance has corrected the noncompliance and is correctly implementing the regulatory requirement for infants and toddlers who receive evaluations, assessments and IFSP meetings within the required time.

Describe how the State verified that each individual case of noncompliance was corrected

Part C monitoring staff examined the individual child record of each infant or toddler who did not have an evaluation, assessment and IFSP meeting within 45 days. The review of records indicated that children who had not received evaluations, assessments and timely IFSP meeting sindeed had subsequently completed evaluation and the IFSP meeting was conducted, although late.

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

OSEP Response

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2017-June 30, 2018). The State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

Because the State reported less than 100% compliance for FFY 2017, the State must report on the status of correction of noncompliance identified in FFY 2017 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2018 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2017 for this indicator. (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2018 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2017, although its FFY 2017 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2017.

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 8A: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

(20 U.S.C. 1416(a)(3)(B) and 1442)

storical Data seline Data: 2005											
FFY FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
rget			100%	100%	100%	100%	100%	100%	100%	100%	100%
ata		54.00%	99.00%	55.00%	88.00%	96.00%	91.00%	90.00%	96.00%	85.14%	92.02%
FFY 2015 2016 Target 100% 100% Data 95.48% 90.97% Key: Gray – Data Prior to Baseline Yellow – Baseline											
	FFY				2017				201	8	
					100%				1009	%	

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

FFY 2017 SPP/APR Data

Data include only those toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday.



No

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
185	269	90.97%	100%	99.26%

Number of documented delays attributable to exceptional family circumstances	92
This number will be added to the "Number of children exiting Part C who have an IFSP with transition steps and services" field to calculate the numerator for this indicator.	62

What is the source of the data provided for this indicator?

State monitoring

State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

First Connections selected the period of time from July 1, 2017 - June 30, 2018 to collect data to represent reporting for the full fiscal year 2017.

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Program data for Indicator 8 was retrieved from the Comprehensive Data System (CDS) for FFY 2017. First Connection Data Unit staff used the inquiry process to ensure the validity of the data collected. Part C staff collects indicator 8 data from all provider types and geographical areas and is reflective of a full fiscal year. The First Connections data system was designed to produce an electronic record for each infant and toddler within the program, that accurately reflects the status of the infant and toddlers file at any given time. Within the child's file, the system includes steps and services listed on the child's IFSP. Arkansas Data Unit staff allow each AEIS provider time to review their program data for verification and resubmission to the data unit. Additional time is given for Agency staff to verify and confirm local provider data. Detail analysis is completed by the Data Manager to ensure that data submitted is representative of a full year. (FFY2017)

Actions required in FFY 2016 response

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified Findings of Noncompliance Verified as Corrected Within One Year		Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected		
4	0	4	0		

FFY 2016 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

The Lead Agency's Monitoring staff issued official finding notification letters to EIS providers advising them of their non- compliance. The letter informed local providers of their scores in connection to transition steps. EIS provider notification letters cited the federal regulations and informed them that they have to ensure that all children receive timely transition planning and that they must correct all noncompliance. In accordance with procedures outlined in the Arkansas' monitoring manual, the providers were given 90 days to correct identified noncompliance, however, correction must be made no later than one year from the date of notification.

Monitoring staff then review updated data for transition steps to ensure that the provider is correctly implementing the regulatory requirements by making sure there is no ongoing noncompliance.

Describe how the State verified that each individual case of noncompliance was corrected

As a part of First Connections monitoring process, staff verify correction of noncompliance for each provider that is cited for noncompliance. Staff review files for toddlers who did not receive timely transition planning and were not in compliance with requirements to verify that the children received transition services (steps) although late, unless that child is no longer within the jurisdiction of the program. First Connections staff verified that all noncompliance was corrected within one year of notification.

FFY 2015 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

The Lead Agency's Monitoring staff issued official finding notification letters to EIS providers advising them of their non- compliance. The letter informed local providers of their scores in connection to transition steps. EIS provider notification letters cited the federal regulations and informed them that they have to ensure that all children receive timely transition planning and that they must correct all noncompliance. In accordance with 8/2/2019

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) procedures outlined in the Arkansas' monitoring manual, the providers were given 90 days to correct identified noncompliance, however, correction must be made no later than one year from the date of notification.

Monitoring staff then review updated data for transition steps to ensure that the provider is correctly implementing the regulatory requirements by making sure there is no ongoing noncompliance.

Describe how the State verified that each individual case of noncompliance was corrected

As a part of First Connections monitoring process, staff verify correction of noncompliance for each provider that is cited for noncompliance. Staff review files for toddlers who did not receive timely transition planning and were not in compliance with requirements to verify that the children received transition services (steps) although late, unless that child is no longer within the jurisdiction of the program. First Connections staff verified that all noncompliance was corrected within one year of notification.

OSEP Response

Because the State reported less than 100% compliance for FFY 2017, the State must report on the status of correction of noncompliance identified in FFY 2017 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2018 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2017 for this indicator. (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2018 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2017, although its FFY 2017 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2017.

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 8B: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		79.00%	96.40%	89.00%	88.00%	95.00%	96.00%	91.00%	97.00%	87.61%	95.82%

FFY	2015	2016		
Target	100%	100%		
Data	98.64%	99.28%		

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

FFY 2017 SPP/APR Data

Data include notification to both the SEA and LEA



O No

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
269	269	99.28%	100%	100%

Number of parents who opted out
This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.

Describe the method used to collect these data

The state used the Comprehensive Data System to collect data for Indicator 8. Part C selected the time period from July 1, 2017 to June 30, 2018 to reflect reporting for the full fiscal year.

Do you have a written opt-out policy? No

What is the source of the data provided for this indicator?



Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

State Fiscal Year July 1, 2017 through June 30, 2018

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Data for indicator 8 was collected from the Comprehensive Data System (CDS). The inquiry process was used by First Connections staff to verify information collected from the states database. Arkansas providers use the CDS to report data on the infants and toddlers that they provide services and supports to within their agency. Program data is collected from all provider types within the state of Arkansas. An electronic record is generated for each First Connections infant and toddler within CDS. As part of the child's file, actions related to transition are included as part of the required activities in the database. Administrators within the Lead Agency are allowed direct access to the AEIS providers electronic file, which permits them to work closely with the local programs to provide guidance and clarification.

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected		
3	0	3	0		

FFY 2016 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

Notifications were issued by the Lead Agency staff to local early intervention providers informing them of their status regarding non-compliance. The AEIS provider letters gives a clear outline of their scores associated to SEALEA notification. As part of the notification process, the providers letters specified the federal regulations and directed them that they must ensure that all children in their program receive timely transition planning and that they must correct all noncompliance. First Connections monitoring procedures allows AEIS providers 90 days to correct identified noncompliance, however, correction must be made no later than one year from the notification date.

Monitoring staff then review updated data for SEALEA notification to ensure that the provider is correctly implementing the regulatory requirements by making sure there is no ongoing noncompliance.

Describe how the State verified that each individual case of noncompliance was corrected

The First Connections monitoring guidelines requires agency staff to verify that each LEA corrected each individual case of noncompliance. Verifications process includes an analysis of records for toddlers who did not receive timely transition planning and were not in compliance with requirements to verify that the children received transition services (SEA/LEA notification) although late, unless that child is no longer within the jurisdiction. Part C staff certified that all noncompliance was corrected within one year of notification, for each AEIS provider.

OSEP Response

Because the State reported less than 100% compliance for FFY 2017, the State must report on the status of correction of noncompliance identified in FFY 2017 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2018 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2017 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2018 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2017, although its FFY 2017 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2017.

Required Actions

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 8C: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the State educational agency (SEA) and the local educational agency (LEA) where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		87.00%	44.00%	55.00%	57.00%	86.00%	87.00%	76.00%	87.00%	86.28%	83.59%

FFY	FFY 2015			
Target	100%	100%		
Data	88.24%	93.63%		

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2017 - FFY 2018 Targets

	2017	2018		
Target	100%	100%		

FFY 2017 SPP/APR Data

Data reflect only those toddlers for whom the Lead Agency has conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services

Yes

O No

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
161	269	93.63%	100%	90.33%

Number of toddlers for whom the parent did not provide approval for the transition conference This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.	0
Number of documented delays attributable to exceptional family circumstances This number will be added to the "Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B" field to calculate the numerator for this indicator.	82

Reasons for Slippage

Data for Arkansas regarding the number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B, declined around 3% from FFY 2016. The Lead Agency enrolled new providers and hired new staff to implement supports and services. Data analysis indicates that some providers and staff may not have a clear understanding of transition policy and procedures. First Connections Professional Development team members have and will continue to provide on-going training and technical assistance to AEIS providers and state staff concerning the requirements for proper transition. Also, the Lead Agency has tools and documents that support the improvement of actions that assist with guiding the process.

What is the source of the data provided for this indicator?



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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

Arkansas First Connections collected data from the period of June 30, 2017- July 1, 2018. The data collected during this time period represents reporting for the full fiscal year. (2017)

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Indicator 8 data was retrieved from the Comprehensive Data System. Arkansas Data staff used the inquiry process to verify the information collected in the states data base. Annual Performance Report data was gathered from each agency provider type. Arkansas Early Intervention providers and State Service Coordinators enter individual child data on the infants and toddlers that they serve directly in the data system. The Lead Agency developed the Comprehensive Data System to gather and display data that reflects the status of the infant and toddler's early intervention record. As part of the individual child file, the system includes, the date of the child's transition conference as required in Part C policy. Program data was taken from IFSP's with dates starting July 1, 2017- June 30, 2018, and forwarded to AEIS providers and state staff for review and submission back to the Lead Agency data unit. First Connections Data Manager verified that the data reported for this time period (FFY2017) is reflective of all the infants and toddlers for the full reporting period.

Actions required in FFY 2016 response

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected		
3	0	3	0		

FFY 2016 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

Arkansas monitoring manual requires Lead Agency staff to send notification letters to early intervention service providers informing them of their non- compliance. Notification letters advised them of their status regarding timely transition conferences. The letters cited the federal regulations and informed them that they have to ensure that all children receive timely transition planning and that they must correct all noncompliance. Lead Agency requirements allows the providers 90 days to correct identified noncompliance, however, correction must be made no later than one year from the date of notification to the AEIS provider

Monitoring staff then review updated data for transition conferences to ensure that the provider is correctly implementing the regulatory requirements for subsequent children by making sure there is no ongoing noncompliance and that transition conference are held within timelines

Describe how the State verified that each individual case of noncompliance was corrected

First Connections Quality Assurance verification process requires that program staff conduct a course of action that involves an examination of files for toddlers who did not have timely transition conferences. Staff verified that each child for whom a conference was not provided received transition conferences, although the conference was late, unless that child is no longer within the jurisdiction of the program. Lead Agency staff confirmed that all noncompliance was corrected within one year of notification to the AEIS provider.

FFY 2015 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

Arkansas monitoring manual requires Lead Agency staff to send notification letters to early intervention service providers informing them of their non-compliance. Notification letters advised them of their status regarding timely transition conferences. The letters cited the federal regulations and informed them that they have to ensure that all children receive timely transition planning and that they must correct all noncompliance. Lead Agency requirements allows the providers 90 days to correct identified noncompliance, however, correction must be made no later than one year from the date of notification to the AEIS provider.

Monitoring staff then review updated data for transition conferences to ensure that the provider is correctly implementing the regulatory requirements for subsequent children by making sure there is no ongoing noncompliance and that transition conference are held within timelines

Describe how the State verified that each individual case of noncompliance was corrected

First Connections Quality Assurance verification process requires that program staff conduct a course of action that involves an examination of files for toddlers who did not have timely transition conferences. Staff verified that each child for whom a conference was not provided received transition conferences, although the conference was late, unless that child is no longer within the jurisdiction of the program. Lead Agency staff confirmed that all noncompliance was corrected within one year of notification to the AEIS provider.

OSEP Response

Because the State reported less than 100% compliance for FFY 2017, the State must report on the status of correction of noncompliance identified in FFY 2017 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2018 SPP/APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2017 for this indicator. (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2018 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2017, although its FFY 2017 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2017.

Required Actions

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 9: Resolution Sessions

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures under section 615 of the IDEA are adopted).

(20 U.S.C. 1416(a)(3)(B) and 1442)

Historical Data

Baseline Data:

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥										0%	0%
Data										0%	0%

	FFY	2015	2016
Target≥		0%	0%
	Data	0%	

Key:		Gray - Data Prior to Baseline		Yellow - Baseline	Blue – Data Update
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FFY 2017 - FFY 2018 Targets

FFY		2017	2018
	Target ≥	0%	0%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/8/2018	3.1(a) Number resolution sessions resolved through settlement agreements	n	null
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints Process Complaints		3.1 Number of resolution sessions	n	null

FFY 2017 SPP/APR Data

3.1(a) Number resolution sessions resolved through settlement agreements	3.1 Number of resolution sessions	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
1	1		0.00%	100%

Actions required in FFY 2016 response

none

OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2017. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

Required Actions

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 10: Mediation

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥				0%						0%	0%
Data								0%			

FFY	2015	2016
Target ≥	0%	
Data		

Kovr	Gray - Data Prior to Baseline	Vollow - Basolino	Blue - Data Undate
ney.	Gray – Data Prior to Baseline	reliow – baseline	blue – Data Opuate

FFY 2017 - FFY 2018 Targets

FFY	2017			2018		
Target	-			-		

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the introduction.

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1.a.i Mediations agreements related to due process complaints	n	null
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1.b.i Mediations agreements not related to due process complaints	n	null
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1 Mediations held	n	null

FFY 2017 SPP/APR Data

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data
0	0	0		% - %	

Actions required in FFY 2016 response

none

OSEP Response

The State reported fewer than ten mediations held in FFY 2017. The State is not required to meet its targets until any fiscal year in which ten or more mediations were held.

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Indicator 11: State Systemic Improvement Plan

Monitoring Priority: General Supervision

Results indicato	r: The State's	s SPP/APR in	ncludes a Sta	te Systemic I	mprovemen	t Plan (SSIP) that	meets the requiren	nents set forth fo	or this indica	itor.				
Reported Da	ata													
Baseline Data:														
FFY	2013	2014	2015	2016	2017									
Target														
Data														
Key:	Gray – Da	ata Prior to Ba Blue – Data		Yellow – Base	eline									
FFY 2018 Ta	arget													
			FFY							2018				
Target														
							Key:							
Please see the a	attachment bel	of Stakeho	•		e the Stakeho	lder Involvement sed	ction of the <u>introducti</u> e	<u>on</u> .						
Overview														
Please see the	attached.													
Infants and Todd	now the State	oilities and the	ir Families, an	d (2) identify re	oot causes co	ntributing to low pe	618 data collections,	cription must inclu	de informatio	n about how th	e data were	disaggregat	ed by multipl	e variables (e.g
	vement. İn add	dition, if the Sta	ate identifies a	ny concerns a	bout the qual		As part of its data ana escription must includ							

Please see attached.		

Analysis of State Infrastructure to Support Improvement and Build Capacity

A description of how the State analyzed the capacity of its current infrastructure to support improvement and build capacity in EIS programs and/or EIS providers to implement, scale up, and sustain the use of evidence-based practices to improve results for infants and toddlers with disabilities and their families. State systems that make up its infrastructure include, at a minimum: governance, fiscal, quality standards, professional development, data, technical assistance, and accountability/monitoring. The description must include current strengths of the systems, the extent the systems are coordinated, and areas for improvement of functioning within and across the systems. The State must also identify current State-level improvement plans and other early learning initiatives, such as Race to the Top-Early Learning Challenge and the Home Visiting program and describe the extent that these new initiatives are aligned, and how they are, or could be, integrated with, the SSIP. Finally, the State should identify representatives (e.g., offices, agencies, positions, individuals, and other stakeholders) that were involved in developing Phase I of the SSIP and that will be involved in developing and implementing Phase II of the SSIP.

Please see	attachment	helow

State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and Their Families

A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be aligned to an SPP/APR indicator or a component of an SPP/APR indicator. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be clearly based on the Data and State Infrastructure Analyses and must be a child- or family-level outcome in contrast to a process outcome. The State may select a single result (e.g., increase the rate of growth in infants and toddlers demonstrating positive social-emotional skills) or a cluster of related results (e.g., increase the percentage reported under child outcome B under Indicator 3 of the SPP/APR (knowledge and skills) and increase the percentage trend reported for families under Page 35 of 39

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 4 (helping their child develop and learn)).
Statement
Please see attachment below.
Description
Please see attachment below.
Selection of Coherent Improvement Strategies
An explanation of how the improvement strategies were selected, and why they are sound, logical and aligned, and will lead to a measurable improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. The improvement strategies should include the strategies, identified through the Data and State Infrastructure Analyses, that are needed to improve the State infrastructure and to support EIS program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with

Theory of Action

Disabilities and their Families.

Please see attachment below.

A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in EIS programs and/or EIS providers, and achieve improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

Submitted Theory of Action: No Theory of Action Submitted

Provide a description of the provided graphic illustration (optional)

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Infrastructure Development

- (a) Specify improvements that will be made to the State infrastructure to better support EIS programs and providers to implement and scale up EBPs to improve results for infants and toddlers with disabilities and their families.
- (b) Identify the steps the State will take to further align and leverage current improvement plans and other early learning initiatives and programs in the State, including Race to the Top-Early Learning Challenge, Home Visiting Program, Early Head Start and others which impact infants and toddlers with disabilities and their families.
- (c) Identify who will be in charge of implementing the changes to infrastructure, resources needed, expected outcomes, and timelines for completing improvement efforts.
- (d) Specify how the State will involve multiple offices within the State Lead Agency, as well as other State agencies and stakeholders in the improvement of its infrastructure.

Support for EIS programs and providers Implementation of Evidence-Based Practices

- (a) Specify how the State will support EIS providers in implementing the evidence-based practices that will result in changes in Lead Agency, EIS program, and EIS provider practices to achieve the SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Identify steps and specific activities needed to implement the coherent improvement strategies, including communication strategies and stakeholder involvement; how identified barriers will be addressed; who will be in charge of implementing; how the activities will be implemented with fidelity; the resources that will be used to implement them; and timelines for completion.
- (c) Specify how the State will involve multiple offices within the Lead Agency (and other State agencies such as the SEA) to support EIS providers in scaling up and sustaining the implementation of the evidence-based practices once they have been implemented with fidelity.

Evaluation

- (a) Specify how the evaluation is aligned to the theory of action and other components of the SSIP and the extent to which it includes short-term and long-term objectives to measure implementation of the SSIP and its impact on achieving measurable improvement in SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Specify how the evaluation includes stakeholders and how information from the evaluation will be disseminated to stakeholders
- (c) Specify the methods that the State will use to collect and analyze data to evaluate implementation and outcomes of the SSIP and the progress toward achieving intended improvements in the SIMR(s).
- (d) Specify how the State will use the evaluation data to examine the effectiveness of the implementation; assess the State's progress toward achieving intended improvements; and to make modifications to the SSIP as necessary.

Technical Assistance and Support

Describe the support the State needs to develop and implement an effective SSIP. Areas to consider include: Infrastructure development; Support for EIS programs and providers implementation of EBP; Evaluation; and Stakeholder involvement in Phase II.

Phase III submissions should include:

- Data-based justifications for any changes in implementation activities.
- Data to support that the State is on the right path, if no adjustments are being proposed.
- Descriptions of how stakeholders have been involved, including in decision-making.

A. Summary of Phase 3

- 1. Theory of action or logic model for the SSIP, including the SiMR.
- 2. The coherent improvement strategies or principle activities employed during the year, including infrastructure improvement strategies.
- 3. The specific evidence-based practices that have been implemented to date.
- 4. Brief overview of the year's evaluation activities, measures, and outcomes.
- Highlights of changes to implementation and improvement strategies.

B. Progress in Implementing the SSIP

- 1. Description of the State's SSIP implementation progress: (a) Description of extent to which the State has carried out its planned activities with fidelity—what has been accomplished, what milestones have been met, and whether the intended timeline has been followed and (b) Intended outputs that have been accomplished as a result of the implementation activities.
- 2. Stakeholder involvement in SSIP implementation: (a) How stakeholders have been informed of the ongoing implementation of the SSIP and (b) How stakeholders have had a voice and been involved in decision-making regarding the ongoing implementation of the SSIP.

C. Data on Implementation and Outcomes

- 1. How the State monitored and measured outputs to assess the effectiveness of the implementation plan: (a) How evaluation measures align with the theory of action, (b) Data sources for each key measure, (c) Description of baseline data for key measures, (d) Data collection procedures and associated timelines, (e) [If applicable] Sampling procedures, (f) [If appropriate] Planned data comparisons, and (g) How data management and data analysis procedures allow for assessment of progress toward achieving intended improvements
- 2. How the State has demonstrated progress and made modifications to the SSIP as necessary: (a) How the State has reviewed key data that provide evidence regarding progress toward achieving intended improvements to infrastructure and the SiMR, (b) Evidence of change to baseline data for key measures, (c) How data support changes that have been made to implementation and improvement strategies, (d) How data are informing next steps in the SSIP evaluation: (a) How stakeholders have been informed of the ongoing evaluation of the SSIP and (b) How stakeholders have had a voice and been involved in decision-making regarding the ongoing evaluation of the SSIP

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) D. Data Quality Issues: Data limitations that affected reports of progress in implementing the SSIP and achieving the SIMR 1. Concern or limitations related to the quality or quantity of the data used to report progress or results Implications for assessing progress or results Plans for improving data quality E. Progress Toward Achieving Intended Improvements 1. Infrastructure changes that support SSIP initiatives, including how system changes support achievement of the SiMR, sustainability, and scale-up 2. Evidence that SSIP's evidence-based practices are being carried out with fidelity and having the desired effects 3. Outcomes regarding progress toward short-term and long-term objectives that are necessary steps toward achieving the SIMR 4. Measurable improvements in the SIMR in relation to targets F. Plans for Next Year ${\bf 1.}\ {\bf Additional}\ {\bf activities}\ {\bf to}\ {\bf be}\ {\bf implemented}\ {\bf next}\ {\bf year},\ {\bf with}\ {\bf timeline}$ 2. Planned evaluation activities including data collection, measures, and expected outcomes 3. Anticipated barriers and steps to address those barriers 4. The State describes any needs for additional support and/or technical assistance **OSEP** Response **Required Actions**

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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR) Certify and Submit your SPP/APR

I certify that I am the Director of the State's Lead Agency under Part C of the IDEA, or his or her designee, and that the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report is accurate.

Selected: Designated by the Lead Agency Director to certify

Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report.

Name: Tracy Turner

Title: Part C Coordinator

Email: tracy.turner@dhs.arkansas.gov

Phone: 501-682-8703

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